PTO/SB/08A (08-00)

Approved for use through 10/31/2002, OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of informeth

Substitute for form 1449A/PTO

Confirmation 1.

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary) Sheet 1 of 1

a collection of information unless it displays a	a valid OMB control number.
Application Number	10/796,397
Confirmation No.	1881
Filing Date	March 9, 2004
First Named Inventor	Falotico 1619 1613
Group Art Unit	1619 1013
Examiner Name	Jennifer A. Berrios
Attorney Docket Number	CRD 5068 USNP

U.S. PATENT DOCUMENTS						
Examiner Initials	Cite No.1	U.S. Patent Document				
		Number	Kind Code ² (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document mm-dd-yyyy	Pages, Columns, Lines, where relevant passages o relevant figures appear
	7.1		-0000			

FOREIGN PATENT DOCUMENTS Foreign Patent Document Date of Publication Pages, Columns, Lines of Cited Document where relevant Name of Patentee or Examiner Cite passages or relevant mm-dd-vyyv Applicant of Cited Document figures appear Initials Office³ Number KindCode⁵ No.1 WO 98/033443 Α1 Angioguard, Inc. 08-06-1998

_				
	Examiner Signature	/Jennifer Berrios/	Date Considered	12/07/2010

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

I Unique chation designation number. See attaiched Kinds of U.S. Patient Documents. Either Office that issued the document by the two-letter code (WIPD Standard ST.3., ser Suppanees patient documents, the indication of the year of the reging of the Emperor must precede the explain number of the patient document. s Kind of document by the appropriate symbols as indicated on the document under WIPD Standard ST. 16 if possible . Application is to place a check mark there if English imagage Translation is attained.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will very depending upon the needs of the individual case, Any comments on the amount of time you are required to complete their form should be sent to the Child Information Office. We after and Traderaryk Office. Wealington, Dc 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandra, VA 22313-1450